

Email: planning@camden.gov.uk

Phone: 020 7974 4444 Fax: 020 7974 1680 Development Management Camden Town Hall Extension Argyle Street London WC1H 8EQ

## Application for approval of details reserved by condition. Town and Country Planning Act 1990 Planning (Listed Buildings and Conservation Areas) Act 1990

Publication of applications on planning authority websites.

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

1. Applicant N	ame, Address and	Contact Details				
Title: Mr	First Name:			Surname:	Yurtseven	
Company name:	Camden Agar Ltd					
Street address:	Unit 6  Cranford Way Industrial Estate					
			Telephone number:			
			Mobile number:			
Town/City:	London		Fax number:			
Country:			Email address:			
Postcode:	N8 9DG					
Are you an agent	acting on behalf of the	applicant?	Yes	lo		
	e, Address and Co					
Title: Mr		avid		Surname:	Mercer	
Company name:	DVM Architects Ltd					
Street address:	4A					
	Murray Street		Telephone numb	oer: 02074	4852121	
			Mobile number:			
Town/City:	London		Fax number:			
Country:	United Kingdom		Email address:			
Postcode:	NW1 9RE		studio@dvmarch.com			

3. Site Addres	ss Details			
Full postal addre	ess of the site (including full postcode where available)	) Description:		
House:	27 Suffix:			
House name:				
Street address:	Agar Grove			
Town/City:	LONDON			
Postcode:	NW1 9UG			
Description of lo	ocation or a grid reference			
	eted if postcode is not known):			
Easting:	529734			
Northing:	184364			
4. Pre-applica	ation Advice			
			0.11	
Has assistance of	or prior advice been sought from the local authority ab	out this application?		No
5. Description	n of the Proposal			
Please provide a	a description of the approved development as shown o	on the decision letter		
	le storey roof extension a single dormer window plus i		on of garage to create a	a 2 bedroom dwelling house.
Application refer	ence number: 2015/2522/P		Date of decision:	08/10/2015
	condition number(s) to which this application relates:			
Condition number	er(s):			
	arrent alors du atrata (O. O. Var. O. Na. 1874)			45/40/0045
Has the develop	ment already started?   Yes   No If Yes	s, please state when the deve	opment was started:	15/10/2015
Has the develop	ment been completed?   Yes  No			
<u> </u>				
6. Discharge	of Condition(s)			
	a full description and/or list of the materials/details that nan and plans as proposed	t are being submitted for appr	oval:	
Asgard bike sto	rage brochure			
Asgard 3 bike s Asgard 3 bike s				
7. Part Discha	arge of Condition(s)			
	ζ ,			
Are you seeking	to discharge only part of a condition?		O Yes  No	
8. Site Visit				
o. Oile Visit				
Can the site be s	seen from a public road, public footpath, bridleway or	other public land?	Yes No	
		•		

8. Site Visit											
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)											
The agent											
9. Declaration				_							
I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.	~	Date	16/11/2016								